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Bib Data Sheet

CONFIRMATION NO. 1929

SERIAL NUMBER 09/737,426	FILING DATE 12/15/2000 RULE	CLASS 318 703	GROUP ART UNIT 2837 2125	ATTORNEY DOCKET NO. 10244-005
APPLICANTS Kristinn R. Thorisson, New York, NY;				
** CONTINUING DATA *****				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 02/27/2001				
** SMALL ENTITY **				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and <u>Allowance</u> Acknowledged <u>Chp</u> Examiner's Signature Initials		STATE OR COUNTRY NY	SHEETS DRAWING 4	TOTAL CLAIMS 30
				INDEPENDENT CLAIMS 1
ADDRESS 20583				
TITLE Method for designing an interactive system				
FILING FEE RECEIVED 445	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	